The Design and Implementation of the Republic of Georgia’s Health Network

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Background

The Republic of Georgia’s healthcare system experienced tremendous changes since the mid 1990s. Having recently moved from the state governed and budgeted system, it now needs to become more self-supported. Instead of inpatient care oriented systems, it should become more disease prevention and outpatient care oriented. The healthcare authorities should also establish a medical insurance system, change the mentality of health insurance industry, develop a new financing system, and promote the development of a private/non-governmental health care sector.

All these need not only new strategies but a new environment as well. Information and communication technologies may be seen as expensive tools for the country with a devastated post-Soviet economy. However, the system approach in the development of a modern information system may represent the only way out of existing confusion. The system approach may also be a means of narrowing the gap between present reality and reality of developed countries; and a method of achieving the required restructuring of the system in the near future.

Georgia Health Sector represents the pioneer of transformational changes among NIS countries in the sense of their scale and speed. This became a key factor determining the substantial assistance from such institution as the World Bank (WB). Georgia Health I project of the WB has counted $19M, and now the Georgia Health II Project (around $14M) is under design phase.

There is a serious problem concerning the ability to collect data and to analyze it. The indicators such as epidemiological (e.g., prevalence of diseases, etc.), and administrative (e.g., average length of hospitalization according to medical procedures preformed, personnel distribution among departments and hospitals, budget related issues, etc.)

For example, the forms reported to the CMIS (Center of Medical Information and Statistics), consists of the ICD9 (and from 1999 ICD10), while the forms reported to the Insurance Companies consist of internal and unique coding system. The different data dictionary reporting the same cases to different authorities, does not allow cross checking of data between different sources.

The above emphasizes to the reader the severe problems we are dealing with in the Georgia’s Republic. The special forms needed and the reporting procedures are now being delivered to the naives.

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The idea to create a country-wide health network may look strange to foreign experts, especially considering scarcity of local and state budgets in Georgia. However, a vision to create a modern environment for practical needs of information exchange can be a stabilizing and promoting factor for the Georgia health system development, especially its management and human resources.

Project objectives

To determine the optimal version in the creation of the Georgia health system intranet which will be used, but not limited, by six central participating health organizations, and more than ten regional health centers for the following goals.

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Managerial Aspects

• Secure efficient management of the different sectors of National Health System by the Ministry of Health and other National Institutes.
• Management of Regional Healthcare Centers by the National Health Management Center: providing standards of care, designing and implementing electronic medical records system, distributing legal documents, reports and other managerial applications.
• Supervision and control of the regional units by the State Medical Insurance Company.
• Management and data collecting by the Department of Public Health and National Center for Disease Control and Prevention. Dissemination of the documents and guidelines regarding Disease Prevention and Health Promotion. Collecting statistical data from regional structures by the Center of
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